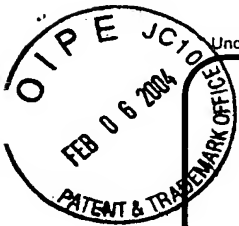


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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing
OR
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 550270.91090 CIP

First Named Inventor Kevin G. Bonde

COMPLETE IF KNOWN

Application Number 10/644,538

Filing Date August 20, 2003

Art Unit 3747

Examiner Name ---

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

OIL CIRCUIT FOR TWIN CAM INTERNAL COMBUSTION ENGINE

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 08/20/2003 as United States Application Number or PCT International

Application Number 10/644,538 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | YES | NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number **26710** OR ☐ Correspondence address below

Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Kevin G.

Family Name Bonde
or Surname

Inventor's
Signature



Date

1-20-04

Residence: City Kiel

State WI

Country US

Citizenship US

Mailing Address 11212 Spring Lake Road

Mailing Address

City Kiel

State WI

ZIP 53042

Country US

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Terrence M.

Family Name Rotter
or Surname

Inventor's
Signature



Date

1-20-04

Residence: City Sheboygan Falls

State WI

Country US

Citizenship US

Mailing Address N6838 STH 32

Mailing Address

City Sheboygan Falls

State WI

ZIP 53085

Country US

☐ Additional inventors are being named on the ____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

Please type a plus sign (+) inside this box → +

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| DECLARATION | ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>4</u> |
|--------------------|--|

| | | | |
|---|----------|---|----------------|
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| Robert W. | | Richards | |
| Inventor's Signature <i>Robert W. Richards</i> | | Date <i>1/20/04</i> | |
| Residence: City Sheboygan | State WI | Country US | Citizenship US |
| Mailing Address 3919 Pineview Court | | | |
| Mailing Address | | | |
| City Sheboygan | State WI | ZIP 53083 | Country US |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| David B. | | Reinbold | |
| Inventor's Signature <i>David B. Reinbold</i> | | Date <i>1/20/04</i> | |
| Residence: City Kohler | State WI | Country US | Citizenship US |
| Mailing Address 940 Aspen Road | | | |
| Mailing Address | | | |
| City Kohler | State WI | ZIP 53044 | Country US |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| William D. | | Koenigs | |
| Inventor's Signature <i>William D. Koenigs</i> | | Date <i>1/20/04</i> | |
| Residence: City Fond du Lac | State WI | Country US | Citizenship US |
| Mailing Address 371 Maona Avenue | | | |
| Mailing Address | | | |
| City Fond du Lac | State WI | ZIP 54935 | Country US |

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| | |
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| DECLARATION | ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>4</u> of <u>4</u> |
|--------------------|--|

| | | | |
|---|----------|---|----------------|
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| Reid L. | | Hanson | |
| Inventor's Signature <i>Reid L. Hanson</i> | | Date <i>1-20-04</i> | |
| Residence: City Manitowoc | State WI | Country US | Citizenship US |
| Mailing Address 1664 Camden Court | | | |
| Mailing Address | | | |
| City Manitowoc | State WI | ZIP 54220 | Country US |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| | | | |
| Inventor's Signature | | Date | |
| Residence: City | State | Country | Citizenship |
| Mailing Address | | | |
| Mailing Address | | | |
| City | State | ZIP | Country |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| | | | |
| Inventor's Signature | | Date | |
| Residence: City | State | Country | Citizenship |
| Mailing Address | | | |
| Mailing Address | | | |
| City | State | ZIP | Country |